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Appro-

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional) 00145.US1/PHRM0020-100

	In re Application of Gavriel Vogeli et al.					
		Application Number 09/828,432 Filed April 6, 2001				FIVED
/	For Novel G Protein-Coupled Receptors					
7		Group Art Unit 1646	Examiner John D. Ulm		——————————————————————————————————————	
	This is a request under the provisio response in the above identified ap		a) to extend the p	period for filing a	TECH CE	NTER 1800/2900
	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):					
	One month (37 CFR	\$		* 1		
	Two months (37 CFR 1.17(a)(2))			\$		
				\$ <u>19</u> 6	<u>60</u>	14. 163
	Four months (37 CFR 1.17(a)(4))			\$		1 × 1 ×
	Five months (37 CF	R 1.17(a)(5))		\$		
	☐ A check in the amount of th ☐ Payment by credit card. For The Commissioner has alrest application to a Deposit Accommissioner is hereby or credit any overpayment. I have enclosed a duplicate I am the ☐ applicant/inventor. ☐ assignee of record of the Statement under 37 Commissioner is attorney or agent under Registration number if accommissioner is accommissioner. ☐ attorney or agent under Registration number if accommissioner is accommissioner. ☐ attorney or agent under Registration number if accommissioner is accommissioner. ☐ attorney or agent under Registration number if accommissioner is accommissioner in the commissioner is accommissioner in the commissioner is accommissioner in the commissioner in the commissioner is accommissioner in the commissioner	The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number I have enclosed a duplicate copy of this sheet.				
	December 19, 2002			1		
	Date		<u> </u>	Signature		
				Gwilym J. O. Attwe	ell	
				yped or printed nam	ne	
	ITE Signatures of all the inventors or assignee as if more than one signature is required, see the second of the s		erest or their represer	ntative(s) are required. Su	ubmit multiple	
\neg	*Total of forms are submitted.					

Burden Hour Statement. This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.

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DEC 1 8 2002